

**Vehicle/Vessel On-line Access  
Contract Application-IVIPS**

Use this form to apply for access to the Internet Vehicle/Vessel Information Processing System (IVIPS). Businesses and organizations use this service for 24-hour-a-day access to individual vehicle and vessel records via the internet. Submit your completed, signed application by email, mail or fax, and allow 14 business days for processing.

**Email (quickest)**  
ivips@dol.wa.gov  
Print and scan or upgrade to  
Adobe Reader XI or above)

**Mail**  
Vehicle Records Disclosure Unit  
Department of Licensing  
PO Box 2957  
Olympia, WA 98507

**Fax**  
(360) 570-7895  
**Phone**  
(360) 359-4001

Do not use this form for personal or individual record requests.  
Use the Vehicle or Boat Record Request forms located at [dol.wa.gov/forms/formsdpd.html](http://dol.wa.gov/forms/formsdpd.html)

We are committed to protecting personal information. Records and personal information are released in compliance with the federal Driver Privacy Protection Act of 1994 (DPPA), and Washington State laws. These laws restrict disclosure of personal information obtained from vehicle and vessel records, and protect owners from unsolicited business contact. Authorized recipients may only redisclose information or contact owners as permitted by law. There is no guarantee your request will be approved. See authorities at the bottom of page 2 of this application.

If you currently have an IVIPS number, enter it here \_\_\_\_\_

Company/Agency name <b>Urban Custom Bikes</b>		Contact name. Primary applicant and contract manager <b>Jessica Ruse</b>		Contact name 2 (if applicable)		Physical address of business (number and street) <b>4711 Pacific hwy e</b>		City <b>City</b>		State <b>WA</b>		ZIP code <b>98424</b>	
Website <b>www.urbandcustombikes.com</b>		(Area code) Telephone number <b>(253) 517-7142</b>		(Area code) Telephone number <b>(253) 517-7142</b>		Mailing address of business (if different)		City <b>City</b>		State <b>WA</b>		ZIP code <b>98424</b>	
Taxpayer Identification Number (TIN)		Employer Identification Number (EIN)		WA Unified Business Identifier (UBI) <b>603091615</b>		Provide one of these identifiers		City <b>City</b>		State <b>WA</b>		ZIP code <b>98424</b>	

Answer the following  
Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).  
Service & repair on motorcycles. Registered owner information is needed to contact owners when vehicles are left for extended periods of time & work orders remain unpaid.

Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.

*Yes, I will contact the owner via registered owner mail*